



# Suicide Reporting and Data Collection

## How the RPMS Behavioral Health Applications Can Support Suicide Reporting and Data Collection

Suicide, especially among youth and young adults, is a serious problem in Alaska Native/American Indian communities. Surveillance, data collection and data analysis are integral components to a comprehensive community, program or agency response to suicide. However, this data, while essential, is only a part of a coordinated response.

The IHS Information Technology and Support Center (ITSC) released BHS V3.0 in January, 2003. It is a behavioral health application designed for use by behavioral health providers, data entry staff, and managers at I/T/U facilities and programs. A graphical user interface (GUI) front-end to BHS v3.0 is currently under development and will be released summer, 2003. BHS v3.0 combines functionality from MH/SS 2.0, MH/SS Navajo version and CDMIS. It was designed to meet the unique clinical documentation and reporting needs of behavioral health providers from all disciplines, allowing users to record and report on both clinical and program activities. In addition to the existing functions in the applications previously mentioned there are several enhancements in BHSV3.0.

Behavioral health (BH) providers and the Division of Behavioral Health (DBH) requested ITSC to include functionality in the BH applications specific to the reporting and tracking of incidents of suicide. This functionality includes:

- A suicide form with 21 data fields
- Visual prompts to complete a suicide form when a suicide-related POV/problem code is entered (39 Suicide Ideation; 40 Suicide Attempt/Gesture; 41 Suicide Completion)
- Aggregate suicide reports

The suicide form was designed by I/T/U subject matter experts including psychiatrists, psychologists, social workers and alcohol and substance abuse providers. In addition, the form was reviewed by nationally recognized experts on suicide in AI/AN communities including Drs. Phillip May, Lemyra DeBruyn, and Spero Manson. Suggestions from this group, as well as from the BH providers in the field who have been using the form since its release, will be incorporated into future enhancements. The 21 data fields currently included in the suicide reporting form are:

- |                                |                                   |
|--------------------------------|-----------------------------------|
| • Case #                       | • Relationship Status             |
| • Provider Initials            | • Education                       |
| • Provider Discipline          | • Self Destructive Act            |
| • Sex                          | • Method                          |
| • DOB                          | • Previous Attempts               |
| • Age                          | • Substance Abuse Involved        |
| • Employment                   | • Location of Act                 |
| • Date of Act                  | • Contributing Factors            |
| • Tribe of Enrollment          | • Intervention (Ideation/Attempt) |
| • Community of Residence       | • Intervention (Completion)       |
| • Community Where Act Occurred |                                   |

**For additional information:**

visit <http://www.ihs.gov/Cio/BH/index.asp>

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Suicide Reporting Tool  
(sample)

There are five reports specific to suicide POV codes and the suicide reporting form. Innumerable combinations of data fields can be selected within these reports. The main suicide reports are:

- **SUIC** Suicide Report (Age & Sex) - This report will present by age and sex the number of individual patients who were seen for POV codes 39 Suicide Ideation; 40 Suicide Attempt/Gesture; 41 Suicide Completed by a specified date range.
- **SAV** Aggregated suicide form data by selected variables - This report will tally the data items specific to the suicide form as selected by the user.
- **SDEL** Output suicide data in delimited format - This report will extract all data elements on the suicide form in a delimited form for a date range specified by the user which can then be imported into an Excel spread sheet.
- **SGR** Listing of suicide forms by selected variables - This is a general retrieval program for suicide forms. The user can select which forms to include in the report, which type of report to print and if a detailed report is selected, which field items to print.
- **SSR** Standard Suicide aggregate report - This report will tally the data items specific to the suicide form for a date range and community specified by the user.

Data from the suicide forms and reports is electronically exported from individual sites to their respective Area Offices (monthly, quarterly, annually). Area offices compile the data and electronically transmit it to National Programs in Albuquerque where the data is imported into the NPIRS (National Patient Information Reporting System) data base.

If a site does not have access to RPMS, incidents of suicide can still be recorded and reported to Area and Headquarters offices by collecting the information on a paper-based suicide form. This form contains all of the same data fields that are in the RPMS electronic version. A comparable web-based form and reporting system is currently being developed by the IHS Division of Information Resources. It is recommended that BH staff discuss their preferred method of suicide reporting and surveillance with the BH program manager, RPMS site manager, and DBH management to ensure appropriate recording and tracking of this information in a secure and confidential manner. It is also important to note that the suicide reporting form is not a clinical intervention tool and should not be used as such. It was designed to assist sites, Area offices and National Programs to improve the recording and reporting of incidents of suicide in American Indian/Alaska Native communities.